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To: COMMISSIONER FOR PATENTS Fax: 571-273-8300 Tel: Date: JULY 6, 2006 RE: OFFICE ACTION	Our File Ref.: BLB - 024526-V2 Your File Ref.: 10/665, 330 No. of Pages: 19 (Including this cover sheet)
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matthew.eslami@ipaper.com BY FACSIMILE TO (571-273-8300 BY FIRST CLASS MAIL TO THE ADDRESS BELOW JUL 0 6 2006 July 6, 2006 **Commissioner for Patents** United States Patent and Trademark Office Post Office Box 1450 Alexandria, Virginia 22313-1450 SUBMISSION OF RESPONSE TO OFFICE ACTION Applicant(s): MOHAN, et al. RE: 10/665,330 Serial No. Filed on **SEPTEMBER 19, 2003** Title LOW DENSITY PAPERBOARD ARTICLES Our Ref. BLB-024566-V2 Dear Commissioner: Enclosed herewith for filing, Applicant(s) respectfully submit(s) the following checked items: Petition for Extension of Time Under 37 C.F.R. 1.136(a), Form PTO/SB/22, and one (1) copy thereof attached thereto, 2 sheet(s): × Fee Transmittal, Form PTO/SB/17, __1 sheet(s); × Response to Office Action (including attachments, if any), 11 sheet(s) total: × Other: Form PTO/SB/08, 5 sheet(s) included in response Other: П Postage-prepaid return-receipt postcard for your use in stamping to indicate receipt of the above-listed items. Please stamp the enclosed postcard and return same to me to indicate your receipt of the abovelisted items. Please feel free to contact me if you have any questions concerning the above or the enclosed. With kindest regards

Matthew M. Eslami Agent for Applicant(s)

Enclosure(s)
MME/jat

Jane A. Tominson

PTO/SB/17 (01-08)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete If Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). RECEIVED 10/665,330 Application Number TRANSMI GENTALL FAX CENTER Filing Date **SEPTEMBER 19, 2003** For FY 2006 First Named Inventor MOHAN, et al. **Examiner Name** L 0 8 2008 FORTUNA, JOSE A. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1731 TOTAL AMOUNT OF PAYMENT 180.00 Attorney Docket No. BLB-024566-V2 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None I Other (please identify): Deposit Account Deposit Account Number: 09-0525 Deposit Account Name: INT'L PAPER COMPANY For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s)

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WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 500 200 150 250 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 ጸበ Reissue 300 150 500 250 600 300 **Provisional** 200 100 0 0 0 **EXCESS CLAIM FEES** Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Extra Claims Multiple Dependent Claims - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) -3 or HP = HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 Fee (\$) Fee Paid (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Information Disclosure Statement (5 sheets) 180.00 SUBMITTED BY Registration No. 45,488 Signature Telephone 513/248-6193 (Attorney/Agent) Name (Print/Type) MATTHEW M. ESLAMI Date JULY 6, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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